

CHANGE OF CORRESPONDENCE ADDRESS		Application Number	10/532,071
<i>Application</i>		Filing Date	December 13, 2005
		First Named Inventor	Adam BONNE et al.
		Art Unit	3753
		Examiner Name	Rivell, John A.
		Attorney Docket Number	55320.001021
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450			

Please change the Correspondence Address for the above-identified application to:

The address associated with
Customer Number: 25570

OR

<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	ZIP	
Country			
Telephone	Fax		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

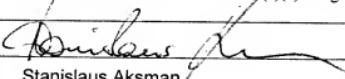
I am the:

Applicant/Inventor

Assignee of record of the entire interest.
Certificate under 37 CFF 3.73(b) is enclosed. (Form PTO/SB/96).

Attorney or agent of record. Registration Number 28,562

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature 

Typed or
Printed Name Stanislaus Aksman

Date February 21, 2007

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.